PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Fees nursuant to	Effective on 12 the Consolidated App	15 /H D 4919)	Complete if Known								
			Application Number 10/5		564,774	64,774					
FEE TRANSMITTAL				Filing Date Ju		e 19, 2006					
	For FY		First Named Inventor J		chim Zimme	rman					
Applicant of	laims small entity s	FR 1 27	Examiner Name		Christine D. Hopkins						
		11(1.27	Art Unit 37								
TOTAL AMOU	T OF PAYMENT	55.00	Attorney Dock	tet No. 06-6	003-JZ	z)					
METHOD OF	PAYMENT (chec	k all that apply)								
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: Deposit Account Name:											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments											
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILI	NG, SEARCH, A	ND EXAMINAT	TION FEES								
	FILI	NG FEES		RCH FEES		ATION FEES					
Application	Type Fee	Small Entity (\$) Fee (\$)	<u>Fee (\$</u>	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)				
Utility	310	155	510	255	210	105					
Design	210	105	100	50	130	65					
Plant	210	105	310	155	160	80					
Reissue	310	155	510	255	620	310					
Provisional	210	105	0	0	0	0					
2. EXCESS C							Small Entity				
Fee Descript	<u>on</u> over 20 (includi	na Reissues)				<u>Fee (\$)</u> 50	Fee (\$) 25				
	endent claim ove		Reissues)			210	105				
	pendent claims	. s (meraeme i	((0.055405)			370	185				
Total Claims	•	Claims Fee	Paid (\$)		Multiple [Dependent Claims					
		x	=_			Fee (\$)	Fee Paid (\$)				
HP = highest number of total claims paid for, if greater than 20. Indep. Claims											
3 or HP = x =											
_	mber of independent	claims paid for, if gr	eater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)											
Other (e.g., late filing surcharge): Notice of Appeal											
Other (e.g., late filing surcharge): Notice of Appeal											
Signature Registration No. 59 200 Telephone 617 722 2410											
							1/14/2008				
Tallie (Fillio Type)	Auam J. Bruno				Date	17/2000					

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 01/31/2008. OMB 0651-0031

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PTO/SB/31 (01-08)

#7"		Docket Number (Optional)								
" .	NOTICE OF APPEAL FROM THE EXAMINER TO			~~ -	イフ	1				
THE BOARD OF PATENT APPEALS AND INTERFERENCES 06-003-JZ										
I hereby certify that this correspondence is being facsimile transmitted In re Application of										
to the	USPTO or deposited with the United States Postal Service with	Joachim Zimmerman								
suffici	ent postage as first class mail in an envelope addressed to missioner for Patents, P.O. Box 1450, Alexandria, VA 22313-	Application Number Filed								
1450"	[37 CFR 1.8(a)] 1/14/2008	10/564,774 June 19, 2006								
on _	// 1/17/ 2008									
Signa	ture Adam // Mm	For Medical Device Art Unit Examiner								
Typer	d or printed \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				a 11	.				
name		3735		Christine	D. Hop	K1U7				
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.										
				s 510.	00					
The fe	ee for this Notice of Appeal is (37 CFR 41.20(b)(1))			\$ <u>310</u> ,						
×	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the	e fee shown ab	ove is reduced	255	66					
~	by half, and the resulting fee is:			<u> 255</u>	.00					
A	A check in the amount of the fee is enclosed.									
	Payment by credit card. Form PTO-2038 is attached.									
	The Director has already been authorized to charge fees in this appl	lication to a Dep	osit Account.	MBLANCO 000	300002 1056	4774				
–	The Director has already been authorized to charge fees in this application to a Deposit Account. have enclosed a duplicate copy of this sheet. 01 FC:2401 255.00 0									
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment									
	to Deposit Account No I have enclosed a duplicate copy of this sheet.									
	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.									
WARNING: Information on this form may become public. Credit card information should not										
be included on this form. Provide credit card information and authorization on PTO-2038.										
iamt	he				// .					
	applicant/inventor.		Aslam	/h /	M					
			2 1	Signature	'''					
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.	-	Adam	the p)) ()					
	(Form PTO/SB/96)		Туре	d or printed nam	ne					
図	attorney or agent of record. 58, 390	((مرد الدر	2 2445		1				
,,,,	Registration number 58, 590		· · · · · · · · · · · · · · · · · · ·	3-3410 lephone number						
	attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34.		1/14/	2008						
	Date									
NO	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.									
Submit multiple forms if more than one signature is required, see below*. Ad justment date: 81/10/2009 MRLANCO										
			80 105 CM P11 C		POURT PIER	774	_			
	*Total of forms are submitted.		01 FC:2402			255.00 PI	Ų			

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.